## APPLICATION FOR ARMED SERVICE ABSENT VOTER BALLOT

R.C. 3511.02(A)

Use of this form by applicant is optional; however, your signed application must contain all the information requested below.

I,	, a qualified el	ector hereby apply for Arn	ned Services Absent Voter	
(Printed name of voter)				
Ballot. I am registered to vote from:				
	,		, Ohio, (Zip code)	
(Street and Number, or Rural Route Number)		(City or Village)	(Zip code)	
I have lived in Ohio for	immediately pre	ceding the commencement	of my service or the date l	
I have lived in Ohio for(Length of time)	_ miniculately pred	ceding the commencement	of my service of the date i	
left to be with or near my service member spous				
1	1			
You must provide your birthdate:montl	///	and one of the fol	lowing:	
montl	ı day y	vear		
☐ Your Ohio driver's license number		, <b>or</b>		
<ul><li>Your Ohio driver's license number _</li><li>The last four digits of your social sec</li></ul>	curity number		•	
☐ Copy of a current and valid photo id	entification, a curre	ent utility bill, bank stateme	ent, government check,	
paycheck or other government docu-	ment that shows yo	ur name and address.		
I wish to vote in the following election to be Check one:	oe held on		_·	
Check one:		(Date of Election)		
1. Primary Election				
□ Democratic	2. □ General Election			
☐ Republican	2	' 1 E1 - 4'		
□ Nonpartisan or issues only	3. □ Spec	cial Election		
Mail ballot and instructions to:	Fax ballot and instructions to:			
	OR	·		
		Area Code	Fax Number	
I hereby declare, under penalty of election	n falsification I an	n a qualified uniformed s	ervices voter as defined i	
federal law (42 U.S.C. 1973ff-6) and the st				
understand that if I do not provide the rec				
- Secretary secretary and provide the text	1	- / -/ FF	L	
X		<del></del>		
XSIGNATURE OF VOTER		Date S	Date Signed	

WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE